POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER	1-2	<del></del>	17 7
FORMALITY REVIEW	· 316	1017	CB/ CE/C
RESPONSE FORMALITY REVIEW			(2) (2)

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~	Rejected	N Nor	n-elected
	Allowed	1Inte	
_	(Through numeral) Canceled	ΑΑρρ	
÷	Restricted	OObi	

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2///	<del></del>	51 52		101	
3///		53	<del>+   -   -   -  </del>	102	<del></del>
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If more than 150 claims or 10 actions staple additional sheet here

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